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CONFIRMATION NO. 4633

SERIAL NUMBER 10/510,025	FILING OR 371(c) DATE 10/01/2004 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 080/04167
APPLICANTS Ron Ginor, Austin, TX;				
** CONTINUING DATA ***** This application is a 371 of PCT/IL03/00281 04/03/2003				
** FOREIGN APPLICATIONS ***** UNITED STATES OF AMERICA 10/116,690 04/04/2002				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 8	TOTAL CLAIMS 20
Verified and Acknowledged Examiner's Signature _____ Initials _____	INDEPENDENT CLAIMS 3			
ADDRESS William H Dippert Reed Smith 29th Floor 599 Lexington Avenue New York ,NY 10022-7650				
TITLE Breast cancer screening				
FILING FEE RECEIVED 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		